



HEALTH ANNUAL STATEMENT

FOR THE YEAR ENDING DECEMBER 31, 2002
of the Condition and Affairs of the

Physicians Health Plan of South Michigan

NAIC Group Code..... ,
(Current Period) (Prior Period)

NAIC Company Code..... 52564

Employer's ID Number..... 38-3311905

Organized under the Laws of Michigan

State of Domicile or Port of Entry Michigan

Country of Domicile US

Licensed as Business Type Health Maintenance Organization

Is HMO Federally Qualified? Yes [] No [X]

Date Incorporated or Organized..... April 17, 1996

Date Commenced Business..... May 1, 2000

Statutory Home Office

One Jackson Square Jackson MI 49201
(Street and Number) (City or Town, State and Zip Code)

Address of Main Administrative Office

One Jackson Square Jackson MI 49201
(Street and Number) (City or Town, State and Zip Code)

517-782-7154
(Area Code) (Telephone Number)

Mail Address

One Jackson Square Jackson MI 49201
(Street and Number or P. O. Box) (City or Town, State and Zip Code)

Primary Location of Books and Records

One Jackson Square Jackson MI 49201
(Street and Number) (City or Town, State and Zip Code)

517-782-7154
(Area Code) (Telephone Number)

Internet Website Address

N/A

Statement Contact

David Spring
(Name)
david_w_spring@uhc.com
(E-Mail Address)

517-841-6973
(Area Code) (Telephone Number) (Extension)
517-782-4512
(Fax Number)

Policyowner Relations Contact

One Jackson Square Jackson MI 49201
(Street and Number) (City or Town, State and Zip Code)

517-782-7154
(Area Code) (Telephone Number) (Extension)

OFFICERS

President Greg Gieseman

Treasurer Charles Johnson

Secretary Charles Johnson

VICE PRESIDENTS

DIRECTORS OR TRUSTEES

Dave Corravo

Brian Admaczyk M.D.

Georgia Fojtasek

Rick Warren

Carl English

K. V. Rao M.D.

Charles Johnson

Phil Miller

Bernard Levy

Phil Milhoan

Carolyn Bradley

Mark Browne M.D.

State of..... Michigan

County of..... Jackson

The officers of this reporting entity being duly sworn, each depose and say that they are the described officers of said reporting entity, and that on the reporting period stated above, all of the herein described assets were the absolute property of the said reporting entity, free and clear from any liens or claims thereon, except as herein stated, and that this statement, together with related exhibits, schedules and explanations therein contained, annexed or referred to, is a full and true statement of all the assets and liabilities and of the condition and affairs of the said reporting entity as of the reporting period stated above, and of its income and deductions therefrom for the period ended, and have been completed in accordance with the NAIC Annual Statement Instructions and Accounting Practices and Procedures manual except to the extent that: (1) state law may differ; or, (2) that state rules or regulations require differences in reporting not related to accounting practices and procedures, according to the best of their information, knowledge and belief, respectively.

(Signature)

Greg Gieseman

(Printed Name)

President

(Signature)

Charles Johnson

(Printed Name)

Secretary

(Signature)

Charles Johnson

(Printed Name)

Treasurer

Subscribed and sworn to before me this

.....day of, 2003

.....

- a. Is this an original filing? Yes[X] No []
- b. If no: 1. State the amendment number
2. Date filed.....
3. Number of pages attached.....

EXHIBIT 3 - ACCIDENT AND HEALTH PREMIUMS DUE AND UNPAID

1	2	3	4	5	6	7
Name of Debtor	1 - 30 Days	31 - 60 Days	61 - 90 Days	Over 90 Days	Nonadmitted	Admitted
A&H Premiums Due and Unpaid						
ADCO Products Hourly.....	74,557					74,557
ADCO Products Salary.....	48,753					48,753
State of Michigan.....	78,427					78,427
0299997. Group subscribers subtotal.....	201,737	0	0	0	0	201,737
0299998. Premiums due and unpaid not individually listed.....	64,036	7,747	(6,614)	(9,017)	6,228	49,924
0299999. Total group.....	265,773	7,747	(6,614)	(9,017)	6,228	251,661
0599999. Accident and health premiums due and unpaid (Page 2, Line 10).....	265,773	7,747	(6,614)	(9,017)	6,228	251,661

EXHIBIT 4 - HEALTH CARE RECEIVABLES

1	2	3	4	5	6	7
Name of Debtor	1 - 30 Days	31 - 60 Days	61 - 90 Days	Over 90 Days	Nonadmitted	Admitted
Health Care Receivables						
United HealthCare--Merck Pharmacy Rebates.....	.....265,831	.....	.....	.....121,405	.....121,405	.....265,831
United Reinsurance--Reinsurance Risk Share.....	.....235,879	.....	.....	.....	.....	.....235,879
0599999. Gross health care receivables.....	.....501,710	.....0	.....0	.....121,405	.....121,405	.....501,710

EXHIBIT 5 - CLAIMS PAYABLE (REPORTED AND UNREPORTED)

Aging Analysis of Unpaid Claims

1	2	3	4	5	6	7
Account	1 - 30 Days	31 - 60 Days	61 - 90 Days	91 - 120 Days	Over 120 Days	Total
Claims Payable (Reported)						
0299999. Aggregate accounts not individually listed - uncovered.....	161,466	16,057	(153)	(21)	(409)	176,940
0399999. Aggregate accounts not individually listed - covered.....	1,129,229	112,297	(1,067)	(148)	(2,860)	1,237,451
0499999. Subtotals.....	1,290,695	128,354	(1,220)	(169)	(3,269)	1,414,391
0599999. Unreported claim and other claim reserves.....						6,741,094
0799999. Total claims payable.....						8,155,485
0899999. Accrued medical incentive pool.....						2,998,560

EXHIBIT 6 - AMOUNTS DUE FROM PARENT, SUBSIDIARIES AND AFFILIATES

1 Name of Affiliate	2 1 - 30 Days	3 31 - 60 Days	4 61 - 90 Days	5 Over 90 Days	6 Nonadmitted	Admitted	
						7 Current	8 Non-Current
Amounts Due From Parent, Subsidiaries and Affiliates							
Physicians Choice Network.....	41,172					41,172	
0199999. Individually listed receivables.....	41,172	0	0	0	0	41,172	0
0399999. Total gross amounts receivable.....	41,172	0	0	0	0	41,172	0

EXHIBIT 7 - AMOUNTS DUE TO PARENT, SUBSIDIARIES AND AFFILIATES

1	2	3	4	5
Affiliate	Description	Amount	Current	Non-Current
Amounts Due To Parent, Subsidiaries and Affiliates				
PHP Shared Services, L.L.C.....	Payable for administrative functions.....	38,090	38,090	
W.A. Foote Memorial Hospital.....	Payable for payroll.....	285,845	285,845	
0199999. Individually listed payables.....		323,935	323,935	0
0399999. Total gross payables.....		323,935	323,935	0

EXHIBIT 8 - PART 1 - SUMMARY OF TRANSACTIONS WITH PROVIDERS

Payment Method	1 Direct Medical Expense Payment	2 Column 1 as a % of Total	3 Total Members Covered	4 Column 3 as a % of Total	5 Column 1 Expenses Paid to Affiliated Providers	6 Column 1 Expenses Paid to Non-Affiliated Providers
Capitation Payments:						
1. Medical groups.....		.....0.0		.....0.0		
2. Intermediaries.....	.....503,366	.....0.8		.....0.0	.....458,665	.....44,701
3. All other providers.....		.....0.0		.....0.0		
4. Total capitation payments.....	.....503,366	.....0.8	.....0	.....0.0	.....458,665	.....44,701
Other Payments:						
5. Fee-for-service.....		.....0.0	.....XXX	.....XXX		
6. Contractual fee payments.....	.....59,523,477	.....99.2	.....XXX	.....XXX	.....10,775,639	.....48,747,838
7. Bonus/withhold arrangements - fee-for-service.....		.....0.0	.....XXX	.....XXX		
8. Bonus/withhold arrangements - contractual fee payments.....		.....0.0	.....XXX	.....XXX		
9. Non-contingent salaries.....		.....0.0	.....XXX	.....XXX		
10. Aggregate cost arrangements.....		.....0.0	.....XXX	.....XXX		
11. All other payments.....		.....0.0	.....XXX	.....XXX		
12. Total other payments.....	.....59,523,477	.....99.2	.....XXX	.....XXX	.....10,775,639	.....48,747,838
13. Total (Line 4 plus Line 12).....	.....60,026,843	.....100.0	.....XXX	.....XXX	.....11,234,304	.....48,792,539

EXHIBIT 8 - PART 2 - SUMMARY OF TRANSACTIONS WITH INTERMEDIARIES

1 NAIC Code	2 Name of Intermediary	3 Capitation Paid	4 Average Monthly Capitation	5 Intermediary's Total Adjusted Capital	6 Intermediary's Authorized Control Level RBC
Transactions with Intermediaries					
.....	Huron Valley Ambulance.....	.....18,172	.....1,514	.....	.....
.....	Foote Behavioral Health.....	.....458,665	.....38,222	.....	.....
.....	United Resource Network.....	.....26,529	.....2,211	.....	.....
9999999. Totals.....		.....503,366	.....XXX	.....XXX	.....XXX

EXHIBIT 9 - FURNITURE, EQUIPMENT AND SUPPLIES OWNED

	1	2	3	4	5	6
Description	Cost	Improvements	Accumulated Depreciation	Book Value Less Encumbrances	Assets Not Admitted	Net Admitted Assets
1. Administrative furniture and equipment.....	33,098		26,557	6,541		6,541
2. Medical furniture, equipment and fixtures.....						0
3. Pharmaceuticals and surgical supplies.....						0
4. Durable medical equipment.....						0
5. Other property and equipment.....						0
6. Total.....	33,098	0	26,557	6,541	0	6,541



EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION

REPORT FOR: 1. CORPORATION.....Physicians Health Plan of South Michigan

2. DIVISION....Jackson, MI

BUSINESS IN THE STATE OF GRAND TOTAL DURING THE YEAF

(Location)

NAIC Group Code.....0

NAIC Company Code....52564

	1 Total	Comprehensive (Hospital & Medical)		4 Medicare Supplement	5 Vision Only	6 Dental Only	7 Federal Employees Health Benefit Plan	8 Title XVIII Medicare	9 Title XIX Medicaid	10 Other
		2 Individual	3 Group							
Total Members at end of:										
1. Prior year.....	31,494	94	31,400							
2. First quarter.....	30,570	125	30,445							
3. Second quarter.....	30,314	102	30,212							
4. Third quarter.....	28,521	111	28,410							
5. Current year.....	28,062	130	27,932							
6. Current year member months.....	354,225	1,313	352,912							
Total Member Ambulatory Encounters for Year:										
7. Physician.....	427,379	2,432	424,907						40	
8. Non-physician.....	656,443	2,352	654,020						71	
9. Totals.....	1,083,822	4,784	1,078,927	0	0	0	0	0	111	0
10. Hospital patient days incurred.....	6,350	23	6,327							
11. Number of inpatient admissions.....	2,270	8	2,262							
12. Premiums collected.....	68,780,118	339,387	68,663,571						(222,840)	
13. Premiums earned.....	67,965,769	358,048	67,607,721							
14. Amount paid for provision of health care services.....	60,026,843	222,098	59,804,463						282	
15. Amount incurred for provision of health care services.....	58,258,574	215,573	58,047,498						(4,497)	



EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION

REPORT FOR: 1. CORPORATION.....Physicians Health Plan of South Michigan

2. DIVISION....Jackson, MI

BUSINESS IN THE STATE OF MICHIGAN DURING THE YEAF

(Location)

NAIC Group Code.....0

NAIC Company Code.....52564

	1	Comprehensive (Hospital & Medical)		4	5	6	7	8	9	10
	Total	Individual	Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefit Plan	Title XVIII Medicare	Title XIX Medicaid	Other
Total Members at end of:										
1. Prior year.....	31,494	94	31,400							
2. First quarter.....	30,570	125	30,445							
3. Second quarter.....	30,314	102	30,212							
4. Third quarter.....	28,521	111	28,410							
5. Current year.....	28,062	130	27,932							
6. Current year member months.....	354,225	1,313	352,912							
Total Member Ambulatory Encounters for Year:										
7. Physician.....	427,379	2,432	424,907						40	
8. Non-physician.....	656,443	2,352	654,020						71	
9. Totals.....	1,083,822	4,784	1,078,927	0	0	0	0	0	111	0
10. Hospital patient days incurred.....	6,350	23	6,327							
11. Number of inpatient admissions.....	2,270	8	2,262							
12. Premiums collected.....	68,780,118	339,387	68,663,571						(222,840)	
13. Premiums earned.....	67,965,769	358,048	67,607,721							
14. Amount paid for provision of health care services.....	60,026,843	222,098	59,804,463						282	
15. Amount incurred for provision of health care services.....	58,258,574	215,573	58,047,498						(4,497)	

SCHEDULE A - VERIFICATION BETWEEN YEARS

1.	Book/adjusted carrying value, December 31, prior year (prior year statement).....	87,793
2.	Increase (decrease) by adjustment:	
2.1	Totals, Part 1, Column 10.....	(13,845)
2.2	Totals, Part 3, Column 7.....	
3.	Cost of acquired (Totals, Part 2, Column 6, net of encumbrances (Column 7) and net of additions and permanent improvements (Column 9)).....	
4.	Cost of additions and permanent improvements:	
4.1	Totals, Part 1, Column 13.....	
4.2	Totals, Part 3, Column 9.....	
5.	Total profit (loss) on sales, Part 3, Column 14.....	
6.	Increase (decrease) by foreign exchange adjustment:	
6.1	Totals, Part 1, Column 11.....	
6.2	Totals, Part 3, Column 8.....	
7.	Amounts received on sales, Part 3, Column 11 and Part 1, Column 12.....	
8.	Book/adjusted carrying value at end of current period.....	73,948
9.	Total valuation allowance.....	
10.	Subtotal (Lines 8 plus 9).....	73,948
11.	Total nonadmitted amounts.....	
12.	Statement value, current period (Page 2, real estate lines, current period).....	73,948

SCHEDULE B - VERIFICATION BETWEEN YEARS

1.	Book value/recorded investment excluding accrued interest of mortgages owned, December 31 of prior year.....	
2.	Amount loaned during year:	
2.1	Actual cost at time of acquisitions.....	
2.2	Additional investment made after acquisitions.....	0
3.	Accrual of discount and mortgage interest points and commitment fees.....	
4.	Increase (decrease) by adjustment.....	
5.	Total profit (loss) on sale.....	
6.	Amounts paid on account or in full during the year.....	
7.	Amortization of premium.....	
8.	Increase (decrease) by foreign exchange adjustment.....	
9.	Book value/recorded investment excluding accrued interest on mortgages owned at end of current period.....	0
10.	Total valuation allowance.....	
11.	Subtotal (Lines 9 plus 10).....	0
12.	Total nonadmitted amounts.....	
13.	Statement value of mortgages owned at end of current period.....	0

NONE

SCHEDULE BA - VERIFICATION BETWEEN YEARS

1.	Book/adjusted carrying value of long-term invested assets owned, December 31 of prior year.....	
2.	Cost of acquisitions during year:	
2.1	Actual cost at time of acquisitions.....	303,193
2.2	Additional investment made after acquisitions.....	303,193
3.	Accrual of discount.....	
4.	Increase (decrease) by adjustment.....	32,907
5.	Total profit (loss) on sale.....	
6.	Amounts paid on account or in full during the year.....	
7.	Amortization of premium.....	
8.	Increase (decrease) by foreign exchange adjustment.....	
9.	Book/adjusted carrying value of long-term invested assets at end of current period.....	336,100
10.	Total valuation allowance.....	
11.	Subtotal (Lines 9 plus 10).....	336,100
12.	Total nonadmitted amounts.....	33,421
13.	Statement value of long-term invested assets at end of current period.....	302,679

SCHEDULE D - PART 1A - SECTION 1

Quality and Maturity Distribution of All Bonds Owned December 31, At Book/Adjusted Carrying Values By Major Types of Issues and NAIC Designations

Quality Rating per the NAIC Designation		1 1 Year or Less	2 Over 1 Year Through 5 Years	3 Over 5 Years Through 10 Years	4 Over 10 Years Through 20 Years	5 Over 20 Years	6 Total Current Year	7 Column 6 as a % of Line 10.7	8 Total from Column 6 Prior Year	9 % from Col. 7 Prior Year	10 Total Publicly Traded	11 Total Privately Placed (a)
1.	U.S. Governments, Schedules D & DA (Group 1)											
1.1	Class 1.....	1,440,130	7,044,482				8,484,612	33.0			8,484,612	
1.2	Class 2.....						0	0.0				
1.3	Class 3.....						0	0.0				
1.4	Class 4.....						0	0.0				
1.5	Class 5.....						0	0.0				
1.6	Class 6.....						0	0.0				
1.7	Totals.....	1,440,130	7,044,482	0	0	0	8,484,612	33.0	0		8,484,612	0
2.	All Other Governments, Schedules D & DA (Group 2)											
2.1	Class 1.....						0	0.0				
2.2	Class 2.....						0	0.0				
2.3	Class 3.....						0	0.0				
2.4	Class 4.....						0	0.0				
2.5	Class 5.....						0	0.0				
2.6	Class 6.....						0	0.0				
2.7	Totals.....	0	0	0	0	0	0	0.0	0		0	0
3.	States, Territories and Possessions, etc., Guaranteed, Schedules D & DA (Group 3)											
3.1	Class 1.....						0	0.0				
3.2	Class 2.....						0	0.0				
3.3	Class 3.....						0	0.0				
3.4	Class 4.....						0	0.0				
3.5	Class 5.....						0	0.0				
3.6	Class 6.....						0	0.0				
3.7	Totals.....	0	0	0	0	0	0	0.0	0		0	0
4.	Political Subdivisions of States, Territories and Possessions, Guaranteed, Schedules D & DA (Group 4)											
4.1	Class 1.....						0	0.0				
4.2	Class 2.....						0	0.0				
4.3	Class 3.....						0	0.0				
4.4	Class 4.....						0	0.0				
4.5	Class 5.....						0	0.0				
4.6	Class 6.....						0	0.0				
4.7	Totals.....	0	0	0	0	0	0	0.0	0		0	0
5.	Special Revenue & Special Assessment Obligations, etc., Non-Guaranteed, Schedules D & DA (Group 5)											
5.1	Class 1.....		103,706				103,706	0.4			103,706	
5.2	Class 2.....						0	0.0				
5.3	Class 3.....						0	0.0				
5.4	Class 4.....						0	0.0				
5.5	Class 5.....						0	0.0				
5.6	Class 6.....						0	0.0				
5.7	Totals.....	0	103,706	0	0	0	103,706	0.4	0		103,706	0

SCHEDULE D - PART 1A - SECTION 1 (continued)

Quality and Maturity Distribution of All Bonds Owned December 31, At Book/Adjusting Carrying Values By Major Types of Issues and NAIC Designations

Quality Rating per the NAIC Designation	1 1 Year or Less	2 Over 1 Year Through 5 Years	3 Over 5 Years Through 10 Years	4 Over 10 Years Through 20 Years	5 Over 20 Years	6 Total Current Year	7 Column 6 as a % of Line 10.7	8 Total from Column 6 Prior Year	9 % from Col. 7 Prior Year	10 Total Publicly Traded	11 Total Privately Placed (a)
6. Public Utilities (Unaffiliated), Schedules D & DA (Group 6)											
6.1 Class 1.....						0	0.0				
6.2 Class 2.....						0	0.0				
6.3 Class 3.....						0	0.0				
6.4 Class 4.....						0	0.0				
6.5 Class 5.....						0	0.0				
6.6 Class 6.....						0	0.0				
6.7 Totals.....	0	0	0	0	0	0	0.0	0		0	0
7. Industrial & Miscellaneous (Unaffiliated), Schedules D & DA (Group 7)											
7.1 Class 1.....	16,260,265	765,325	74,930			17,100,520	66.6			17,100,520	
7.2 Class 2.....						0	0.0				
7.3 Class 3.....						0	0.0				
7.4 Class 4.....						0	0.0				
7.5 Class 5.....						0	0.0				
7.6 Class 6.....						0	0.0				
7.7 Totals.....	16,260,265	765,325	74,930	0	0	17,100,520	66.6	0		17,100,520	0
8. Credit Tenant Loans, Schedules D & DA (Group 8)											
8.1 Class 1.....						0	0.0				
8.2 Class 2.....						0	0.0				
8.3 Class 3.....						0	0.0				
8.4 Class 4.....						0	0.0				
8.5 Class 5.....						0	0.0				
8.6 Class 6.....						0	0.0				
8.7 Totals.....	0	0	0	0	0	0	0.0	0		0	0
9. Parent, Subsidiaries and Affiliates, Schedules D & DA (Group 9)											
9.1 Class 1.....						0	0.0				
9.2 Class 2.....						0	0.0				
9.3 Class 3.....						0	0.0				
9.4 Class 4.....						0	0.0				
9.5 Class 5.....						0	0.0				
9.6 Class 6.....						0	0.0				
9.7 Totals.....	0	0	0	0	0	0	0.0	0		0	0

SCHEDULE D - PART 1A - SECTION 1 (continued)

Quality and Maturity Distribution of All Bonds Owned December 31, At Book/Adjusted Carrying Values By Major Types of Issues and NAIC Designations

Quality Rating per the NAIC Designation	1 1 Year or Less	2 Over 1 Year Through 5 Years	3 Over 5 Years Through 10 Years	4 Over 10 Years Through 20 Years	5 Over 20 Years	6 Total Current Year	7 Column 6 as a % of Line 10.7	8 Total from Column 6 Prior Year	9 % from Col. 7 Prior Year	10 Total Publicly Traded	11 Total Privately Placed (a)
10. Total Bonds Current Year											
10.1 Class 1.....	17,700,395	7,913,513	74,930	.0	.0	25,688,838	100.0	XXX	XXX	25,688,838	.0
10.2 Class 2.....	.0	.0	.0	.0	.0	.0	.0	XXX	XXX	.0	.0
10.3 Class 3.....	.0	.0	.0	.0	.0	.0	.0	XXX	XXX	.0	.0
10.4 Class 4.....	.0	.0	.0	.0	.0	.0	.0	XXX	XXX	.0	.0
10.5 Class 5.....	.0	.0	.0	.0	.0	(c).0	.0	XXX	XXX	.0	.0
10.6 Class 6.....	.0	.0	.0	.0	.0	(c).0	.0	XXX	XXX	.0	.0
10.7 Totals.....	17,700,395	7,913,513	74,930	.0	.0	(b).25,688,838	100.0	XXX	XXX	25,688,838	.0
10.8 Line 10.7 as a % of Col. 6.....	68.9	30.8	.3	.0	.0	100.0	XXX	XXX	XXX	100.0	.0
11. Total Bonds Prior Year											
11.1 Class 1.....						XXX	XXX	.0	.0		
11.2 Class 2.....						XXX	XXX	.0	.0		
11.3 Class 3.....						XXX	XXX	.0	.0		
11.4 Class 4.....						XXX	XXX	.0	.0		
11.5 Class 5.....						XXX	XXX	(c).0	.0		
11.6 Class 6.....						XXX	XXX	(c).0	.0		
11.7 Totals.....	.0	.0	.0	.0	.0	XXX	XXX	(b).0	.0	.0	.0
11.8 Line 11.7 as a % of Col. 8.....	.0	.0	.0	.0	.0	XXX	XXX	.0	XXX	.0	.0
12. Total Publicly Traded Bonds											
12.1 Class 1.....	17,700,395	7,913,513	74,930			25,688,838	100.0	.0	.0	25,688,838	XXX
12.2 Class 2.....						.0	.0	.0	.0	.0	XXX
12.3 Class 3.....						.0	.0	.0	.0	.0	XXX
12.4 Class 4.....						.0	.0	.0	.0	.0	XXX
12.5 Class 5.....						.0	.0	.0	.0	.0	XXX
12.6 Class 6.....						.0	.0	.0	.0	.0	XXX
12.7 Totals.....	17,700,395	7,913,513	74,930	.0	.0	25,688,838	100.0	.0	.0	25,688,838	XXX
12.8 Line 12.7 as a % of Col. 6.....	68.9	30.8	.3	.0	.0	100.0	XXX	XXX	XXX	100.0	XXX
12.9 Line 12.7 as a % of Line 10.7, Col. 6, Section 10.....	68.9	30.8	.3	.0	.0	100.0	XXX	XXX	XXX	100.0	XXX
13. Total Privately Placed Bonds											
13.1 Class 1.....						.0	.0	.0	.0	XXX	.0
13.2 Class 2.....						.0	.0	.0	.0	XXX	.0
13.3 Class 3.....						.0	.0	.0	.0	XXX	.0
13.4 Class 4.....						.0	.0	.0	.0	XXX	.0
13.5 Class 5.....						.0	.0	.0	.0	XXX	.0
13.6 Class 6.....						.0	.0	.0	.0	XXX	.0
13.7 Totals.....	.0	.0	.0	.0	.0	.0	.0	.0	.0	XXX	.0
13.8 Line 13.7 as a % of Col. 6.....	.0	.0	.0	.0	.0	.0	XXX	XXX	XXX	XXX	.0
13.9 Line 13.7 as a % of Line 10.7, Col. 6, Section 10.....	.0	.0	.0	.0	.0	.0	XXX	XXX	XXX	XXX	.0

- (a) Includes \$.0 freely tradable under SEC Rule 144 or qualified for resale under SEC Rule 144A.
- (b) Includes \$.0 current year, \$.0 prior year of bonds with Z designations and \$.0 current year, \$.0 prior year of bonds with Z* designation. The letter "Z" means the NAIC designation was not assigned by the Securities Valuation Office (SVO) at the date of the statement. "Z*" means the SVO could not evaluate the obligation because valuation procedures for the security class are under regulatory review.
- (c) Includes \$.0 current year, \$.0 prior year of bonds with 5* designations and \$.0 current year, \$.0 prior year of bonds with 6* designation. "5*" means the NAIC designation was assigned by the SVO in reliance on the insurer's certification that the issuer is current in all principal and interest payments. "6*" means the NAIC designation was assigned by the SVO due to inadequate certification of principal and interest payments.

SCHEDULE D - PART 1A - SECTION 2

Maturity Distribution of All Bonds Owned December 31, At Book/Adjusting Carrying Values By Major Type and Subtype of Issues

		1	2	3	4	5	6	7	8	9	10	11
	Distribution by Type	1 Year or Less	Over 1 Year Through 5 Years	Over 5 Years Through 10 Years	Over 10 Years Through 20 Years	Over 20 Years	Total Current Year	Column 6 as a % of Line 10.7	Total from Column 6 Prior Year	% from Col. 7 Prior Year	Total Publicly Traded	Total Privately Placed
1.	U.S. Governments, Schedules D & DA (Group 1)											
1.1	Issuer Obligations.....	1,440,130	7,044,482				8,484,612	33.0			8,484,612	
1.2	Single Class Mortgage-Backed/Asset-Backed Securities.....						.0	0.0				
1.7	Totals.....	1,440,130	7,044,482	0	0	0	8,484,612	33.0	0		8,484,612	0
2.	All Other Governments, Schedules D & DA (Group 2)											
2.1	Issuer Obligations.....						.0	0.0				
2.2	Single Class Mortgage-Backed/Asset-Backed Securities.....						.0	0.0				
	MULTI-CLASS RESIDENTIAL MORTGAGE-BACKED SECURITIES:											
2.3	Defined.....						.0	0.0				
2.4	Other.....						.0	0.0				
	MULTI-CLASS COMMERCIAL MORTGAGE-BACKED/ ASSET-BACKED SECURITIES:											
2.5	Defined.....						.0	0.0				
2.6	Other.....						.0	0.0				
2.7	Totals.....	0	0	0	0	0	0	0.0	0		0	0
3.	States, Territories and Possessions, Guaranteed, Schedules D & DA (Group 3)											
3.1	Issuer Obligations.....						.0	0.0				
3.2	Single Class Mortgage-Backed/Asset-Backed Securities.....						.0	0.0				
	MULTI-CLASS RESIDENTIAL MORTGAGE-BACKED SECURITIES:											
3.3	Defined.....						.0	0.0				
3.4	Other.....						.0	0.0				
	MULTI-CLASS COMMERCIAL MORTGAGE-BACKED/ ASSET-BACKED SECURITIES:											
3.5	Defined.....						.0	0.0				
3.6	Other.....						.0	0.0				
3.7	Totals.....	0	0	0	0	0	0	0.0	0		0	0
4.	Political Subdivisions of States, Territories and Possessions, Guaranteed, Schedules D & DA (Group 4)											
4.1	Issuer Obligations.....						.0	0.0				
4.2	Single Class Mortgage-Backed/Asset-Backed Securities.....						.0	0.0				
	MULTI-CLASS RESIDENTIAL MORTGAGE-BACKED SECURITIES:											
4.3	Defined.....						.0	0.0				
4.4	Other.....						.0	0.0				
	MULTI-CLASS COMMERCIAL MORTGAGE-BACKED/ ASSET-BACKED SECURITIES:											
4.5	Defined.....						.0	0.0				
4.6	Other.....						.0	0.0				
4.7	Totals.....	0	0	0	0	0	0	0.0	0		0	0
5.	Special Revenue & Special Assessment Obligations, etc., Non-Guaranteed, Schedules D & DA (Group 5)											
5.1	Issuer Obligations.....		103,706				103,706	0.4			103,706	
5.2	Single Class Mortgage-Backed/Asset-Backed Securities.....						.0	0.0				
	MULTI-CLASS RESIDENTIAL MORTGAGE-BACKED SECURITIES:											
5.3	Defined.....						.0	0.0				
5.4	Other.....						.0	0.0				
	MULTI-CLASS COMMERCIAL MORTGAGE-BACKED/ ASSET-BACKED SECURITIES:											
5.5	Defined.....						.0	0.0				
5.6	Other.....						.0	0.0				
5.7	Totals.....	0	103,706	0	0	0	103,706	0.4	0		103,706	0

SCHEDULE D - PART 1A - SECTION 2 (continued)

Maturity Distribution of All Bonds Owned December 31, At Book/Adjusted Carrying Values By Major Type and Subtype of Issues

Distribution by Type		1 1 Year or Less	2 Over 1 Year Through 5 Years	3 Over 5 Years Through 10 Years	4 Over 10 Years Through 20 Years	5 Over 20 Years	6 Total Current Year	7 Column 6 as a % of Line 10.7	8 Total from Column 6 Prior Year	9 % from Col. 7 Prior Year	10 Total Publicly Traded	11 Total Privately Placed
6.	Public Utilities (Unaffiliated), Schedules D & DA (Group 6)											
6.1	Issuer Obligations.....						.....0	.....0.0				
6.2	Single Class Mortgage-Backed/Asset-Backed Bonds.....						.....0	.....0.0				
	MULTI-CLASS RESIDENTIAL MORTGAGE-BACKED SECURITIES:											
6.3	Defined.....						.....0	.....0.0				
6.4	Other.....						.....0	.....0.0				
	MULTI-CLASS COMMERCIAL MORTGAGE-BACKED/ ASSET-BACKED SECURITIES:											
6.5	Defined.....						.....0	.....0.0				
6.6	Other.....						.....0	.....0.0				
6.7	Totals.....	.....0	.....0	.....0	.....0	.....0	.....0	.....0.0	.....0		.....0	.....0
7.	Industrial & Miscellaneous (Unaffiliated), Schedules D & DA (Group 7)											
7.1	Issuer Obligations.....	.....16,238,872	.....661,718	.....74,930			.....16,975,520	.....66.1			.....16,975,520	
7.2	Single Class Mortgage-Backed/Asset-Backed Bonds.....						.....0	.....0.0				
	MULTI-CLASS RESIDENTIAL MORTGAGE-BACKED SECURITIES:											
7.3	Defined.....						.....0	.....0.0				
7.4	Other.....						.....0	.....0.0				
	MULTI-CLASS COMMERCIAL MORTGAGE-BACKED/ ASSET-BACKED SECURITIES:											
7.5	Defined.....	.....21,393	.....103,607				.....125,000	.....0.5			.....125,000	
7.6	Other.....						.....0	.....0.0				
7.7	Totals.....	.....16,260,265	.....765,325	.....74,930	.....0	.....0	.....17,100,520	.....66.6	.....0		.....17,100,520	.....0
8.	Credit Tenant Loans, Schedules D & DA (Group 8)											
8.1	Issuer Obligations.....						.....0	.....0.0				
8.7	Totals.....	.....0	.....0	.....0	.....0	.....0	.....0	.....0.0	.....0		.....0	.....0
9.	Parent, Subsidiaries and Affiliates, Schedules D & DA (Group 9)											
9.1	Issuer Obligations.....						.....0	.....0.0				
9.2	Single Class Mortgage-Backed/Asset-Backed Bonds.....						.....0	.....0.0				
	MULTI-CLASS RESIDENTIAL MORTGAGE-BACKED SECURITIES:											
9.3	Defined.....						.....0	.....0.0				
9.4	Other.....						.....0	.....0.0				
	MULTI-CLASS COMMERCIAL MORTGAGE-BACKED/ ASSET-BACKED SECURITIES:											
9.5	Defined.....						.....0	.....0.0				
9.6	Other.....						.....0	.....0.0				
9.7	Totals.....	.....0	.....0	.....0	.....0	.....0	.....0	.....0.0	.....0		.....0	.....0

SCHEDULE D - PART 1A - SECTION 2 (continued)

Maturity Distribution of All Bonds Owned December 31, At Book/Adjusted Carrying Values By Major Type and Subtype of Issues

	1	2	3	4	5	6	7	8	9	10	11
Distribution by Type	1 Year or Less	Over 1 Year Through 5 Years	Over 5 Years Through 10 Years	Over 10 Years Through 20 Years	Over 20 Years	Total Current Year	Column 6 as a % of Line 10.7	Total from Column 6 Prior Year	% from Col. 7 Prior Year	Total Publicly Traded	Total Privately Placed
10. Total Bonds Current Year											
10.1 Issuer Obligations.....	17,679,002	7,809,906	74,930	.0	.0	25,563,838	.99.5	.XXX	.XXX	25,563,838	.0
10.2 Single Class Mortgage-Backed/Asset-Backed Bonds.....	.0	.0	.0	.0	.0	.0	.0	.XXX	.XXX	.0	.0
MULTI-CLASS RESIDENTIAL MORTGAGE-BACKED SECURITIES:											
10.3 Defined.....	.0	.0	.0	.0	.0	.0	.0	.XXX	.XXX	.0	.0
10.4 Other.....	.0	.0	.0	.0	.0	.0	.0	.XXX	.XXX	.0	.0
MULTI-CLASS COMMERCIAL MORTGAGE-BACKED/ ASSET-BACKED SECURITIES:											
10.5 Defined.....	21,393	103,607	.0	.0	.0	125,000	.5	.XXX	.XXX	125,000	.0
10.6 Other.....	.0	.0	.0	.0	.0	.0	.0	.XXX	.XXX	.0	.0
10.7 Totals.....	17,700,395	7,913,513	74,930	.0	.0	25,688,838	100.0	.XXX	.XXX	25,688,838	.0
10.8 Line 10.7 as a % of Col. 6.....	68.9	30.8	.3	.0	.0	100.0	.XXX	.XXX	.XXX	100.0	.0
11. Total Bonds Prior Year											
11.1 Issuer Obligations.....						.XXX	.XXX	.0	.0		
11.2 Single Class Mortgage-Backed/Asset-Backed Bonds.....						.XXX	.XXX	.0	.0		
MULTI-CLASS RESIDENTIAL MORTGAGE-BACKED SECURITIES:											
11.3 Defined.....						.XXX	.XXX	.0	.0		
11.4 Other.....						.XXX	.XXX	.0	.0		
MULTI-CLASS COMMERCIAL MORTGAGE-BACKED/ ASSET-BACKED SECURITIES:											
11.5 Defined.....						.XXX	.XXX	.0	.0		
11.6 Other.....						.XXX	.XXX	.0	.0		
11.7 Totals.....	.0	.0	.0	.0	.0	.XXX	.XXX	.0	100.0	.0	.0
11.8 Line 11.7 as a % of Col. 8.....	.0	.0	.0	.0	.0	.XXX	.XXX	.0	.XXX	.0	.0
12. Total Publicly Traded Bonds											
12.1 Issuer Obligations.....	17,679,002	7,809,906	74,930			25,563,838	.99.5	.0	.0	25,563,838	.XXX
12.2 Single Class Mortgage-Backed/Asset-Backed Bonds.....						.0	.0	.0	.0	.0	.XXX
MULTI-CLASS RESIDENTIAL MORTGAGE-BACKED SECURITIES:											
12.3 Defined.....						.0	.0	.0	.0	.0	.XXX
12.4 Other.....						.0	.0	.0	.0	.0	.XXX
MULTI-CLASS COMMERCIAL MORTGAGE-BACKED/ ASSET-BACKED SECURITIES:											
12.5 Defined.....	21,393	103,607				125,000	.5	.0	.0	125,000	.XXX
12.6 Other.....						.0	.0	.0	.0	.0	.XXX
12.7 Totals.....	17,700,395	7,913,513	74,930	.0	.0	25,688,838	100.0	.0	.0	25,688,838	.XXX
12.8 Line 12.7 as a % of Col. 6.....	68.9	30.8	.3	.0	.0	100.0	.XXX	.XXX	.XXX	100.0	.XXX
12.9 Line 12.7 as a % of Line 10.7, Col. 6, Section 10.....	68.9	30.8	.3	.0	.0	100.0	.XXX	.XXX	.XXX	100.0	.XXX
13. Total Privately Placed Bonds											
13.1 Issuer Obligations.....						.0	.0	.0	.0	.XXX	.0
13.2 Single Class Mortgage-Backed/Asset-Backed Bonds.....						.0	.0	.0	.0	.XXX	.0
MULTI-CLASS RESIDENTIAL MORTGAGE-BACKED SECURITIES:											
13.3 Defined.....						.0	.0	.0	.0	.XXX	.0
13.4 Other.....						.0	.0	.0	.0	.XXX	.0
MULTI-CLASS COMMERCIAL MORTGAGE-BACKED/ ASSET-BACKED SECURITIES:											
13.5 Defined.....						.0	.0	.0	.0	.XXX	.0
13.6 Other.....						.0	.0	.0	.0	.XXX	.0
13.7 Totals.....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.XXX	.0
13.8 Line 13.7 as a % of Col. 6.....	.0	.0	.0	.0	.0	.0	.XXX	.XXX	.XXX	.XXX	.0
13.9 Line 13.7 as a % of Line 10.7, Col. 6, Section 10.....	.0	.0	.0	.0	.0	.0	.XXX	.XXX	.XXX	.XXX	.0

SCHEDULE DA - PART 2

Verification of SHORT-TERM INVESTMENTS Between Years

	1	2	3	4	5
	Total	Bonds	Mortgage Loans	Other Short-term Investment Assets (a)	Investments in Parent, Subsidiaries and Affiliates
1. Book/adjusted carrying value, prior year.....	20,792,163			20,792,163	
2. Cost of short-term investments acquired.....	71,786,325	71,786,325			
3. Increase (decrease) by adjustment.....	264,497	264,497			
4. Increase (decrease) by foreign exchange adjustment.....	0				
5. Total profit (loss) on disposal of short-term investments.....	0				
6. Consideration received on disposal of short-term investments.....	75,887,337	55,095,174		20,792,163	
7. Book/adjusted carrying value, current year.....	16,955,648	16,955,648	0	0	0
8. Total valuation allowance.....	0				
9. Subtotal (Lines 7 plus 8).....	16,955,648	16,955,648	0	0	0
10. Total nonadmitted amounts.....	0				
11. Statement value (Lines 9 minus 10).....	16,955,648	16,955,648	0	0	0
12. Income collected during year	272,069	272,069			
13. Income earned during year.....	278,520	278,520			

(a) Indicate the category of such assets, for example, joint ventures, transportation equipment:.....

SCHEDULE DB - PART A - VERIFICATION BETWEEN YEARS

Verification Between Years of Aggregate Write-in Book Value on Options, Caps, Floors and Insurance Futures Options Owned

1.	Aggregate write-in book value, December 31, prior year (Line 8, prior year).....	
2.	Cost/option premium (Section 2, Column 7).....	
3.	Increase/(decrease) by adjustment (Section 1, Column 12) plus (Section 3, Column 13).....	
4.	Gain/(loss) on termination:	
4.1	Recognized (Section 3, Column 14).....	
4.2	Used to adjust basis of hedged item (Section 3, Column 15).....	0
5.	Consideration received on terminations (Section 3, Column 12).....	
6.	Used to adjust basis on open contracts (Section 1, Column 13).....	
7.	Disposition of deferred amount on contracts terminated in prior year:	
7.1	Recognized.....	
7.2	Used to adjust basis of hedged item.....	0
8.	Aggregate write-in book value, December 31, current year (Lines 1 + 2 + 3 + 4 - 5 - 6 - 7).....	0

NONE

SCHEDULE DB - PART B - VERIFICATION BETWEEN YEARS

Verification Between Years of Aggregate Write-in Book Value on Options, Caps, Floors and Insurance Futures Options Written

1.	Aggregate write-in book value, December 31, prior year (Line 8, prior year).....	
2.	Consideration received (Section 2, Column 7).....	
3.	Increase/(decrease) by adjustment (Section 1, Column 12) plus (Section 3, Column 13).....	
4.	Gain/(loss) on termination:	
4.1	Recognized (Section 3, Column 14).....	
4.2	Used to adjust basis (Section 3, Column 15).....	0
5.	Consideration paid on terminations (Section 3, Column 12).....	
6.	Used to adjust basis on open contracts (Section 1, Column 13).....	
7.	Disposition of deferred amount on contracts terminated in prior year:	
7.1	Recognized.....	
7.2	Used to adjust basis.....	0
8.	Aggregate write-in book value, December 31, current year (Lines 1 + 2 + 3 - 4 - 5 - 6 - 7).....	0

NONE

SCHEDULE DB - PART C - VERIFICATION BETWEEN YEARS

Verification Between Years of Aggregate Write-in Book Value on Swaps and Forwards

1.	Aggregate write-in book value, December 31, prior year (Line 8, prior year).....	
2.	Cost or (consideration received) (Section 2, Column 7).....	
3.	Increase/(decrease) by adjustment (Section 1, Column 12) plus (Section 3, Column 13).....	
4.	Gain/(loss) on termination:	
4.1	Recognized (Section 3, Column 14).....	
4.2	Used to adjust basis of hedged item (Section 3, Column 15).....	0
5.	Consideration received (or paid) on terminations (Section 3, Column 12).....	
6.	Used to adjust basis of hedged item on open contracts (Section 1, Column 13).....	
7.	Disposition of deferred amount on contracts terminated in prior year:	
7.1	Recognized.....	
7.2	Used to adjust basis of hedged item.....	0
8.	Aggregate write-in book value, December 31, current year (Lines 1 + 2 + 3 + 4 - 5 - 6 - 7).....	0

NONE

SCHEDULE DB - PART D - VERIFICATION BETWEEN YEARS

Verification Between Years of Aggregate Write-in Book Value on Futures Contracts and Insurance Futures Contracts

1.	Aggregate write-in book value, December 31, prior year (Line 8, prior year).....	
2.	Change in total variation margin on open contracts (difference between years - Section 1, Column 6).....	
3.1	Change in variation margin on open contracts used to adjust basis of hedged item (Section 1, Column 11).....	
3.2	Change in variation margin on open contracts recognized (difference between years - Section 1, Column 10).....	
4.1	Variation margin on contracts terminated during the year (Section 3, Column 6).....	
4.2	Less:	
4.21	Gain/(loss) recognized in current year (Section 3, Column 11).....	
4.22	Gain/(loss) used to adjust basis of hedge (Section 3, Column 12).....	0
4.3	Subtotal (Line 4.1 minus Line 4.2).....	0
5.1	Net additions to cash deposits (Section 2, Column 7).....	
5.2	Less: Net reductions to cash deposits (Section 3, Column 9).....	0
6.	Subtotal (Lines 1 - 2 + 3.1 + 3.2 - 4.3 + 5.2).....	0
7.	Disposition of gain/(loss) on contracts terminated in prior year:	
7.1	Recognized.....	
7.2	Used to adjust basis of hedged item.....	0
8.	Aggregate write-in book value, December 31, current year (Lines 6 + 7.1 + 7.2).....	0

NONE

SCHEDULE DB - PART E - VERIFICATION

Verification of Statement Value and Fair Value of Open Contracts

		Statement Value
1.	Part A, Section 1, Column 10.....	
2.	Part B, Section 1, Column 10.....	
3.	Part C, Section 1, Column 10.....	
4.	Part D, Section 1, Column 9 - 12.....	
5.	Lines (1) - (2) + (3) + (4).....	0
6.	Part E, Section 1, Column 4.....	
7.	Part E, Section 1, Column 5.....	
8.	Lines (5) - (6) - (7).....	0
		Fair Value
9.	Part A, Section 1, Column 11.....	
10.	Part B, Section 1, Column 11.....	
11.	Part C, Section 1, Column 11.....	
12.	Part D, Section 1, Column 9.....	
13.	Lines (9) - (10) + (11) + (12).....	0
14.	Part E, Section 1, Column 7.....	
15.	Part E, Section 1, Column 8.....	
16.	Lines (13) - (14) - (15).....	0

NONE

SCHEDULE DB - PART F - SECTION 1

Summary of Replicated (Synthetic) Assets Open

Replicated (Synthetic) Asset					Components of the Replicated (Synthetic) Asset						
1 Replication RSAT Number	2 Description	3 NAIC Designation or Other Description	4 Statement Value	5 Fair Value	Derivative Instruments Open		Cash Instrument(s) Held				
					6 Description	7 Fair Value	8 CUSIP	9 Description	10 Statement Value	11 Fair Value	12 NAIC Designation or Other Description

NONE

SCHEDULE DB - PART F - SECTION 2

Reconciliation of Replicated (Synthetic) Assets Open

	First Quarter		Second Quarter		Third Quarter		Fourth Quarter		Year-To-Date	
	1 Number of Positions	2 Total Replicated (Synthetic) Assets Statement Value	3 Number of Positions	4 Total Replicated (Synthetic) Assets Statement Value	5 Number of Positions	6 Total Replicated (Synthetic) Assets Statement Value	7 Number of Positions	8 Total Replicated (Synthetic) Assets Statement Value	9 Number of Positions	10 Total Replicated (Synthetic) Assets Statement Value
1. Beginning Inventory.....			.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
2. Add: Opened or acquired transactions.....									.....0	.....0
3. Add: Increases in replicated asset statement value.....	.....XXX		.....XXX		.....XXX		.....XXX		.....XXX	.....0
4. Less: Closed or disposed of transactions.....									.....0	.....0
5. Less: Positions disposed of for failing effectiveness criteria.....									.....0	.....0
6. Less: Decreases in replicated (synthetic) asset statement value.....	.....XXX		.....XXX		.....XXX		.....XXX		.....XXX	.....0
7. Ending inventory.....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0

NONE

SCHEDULE S - PART 1 - SECTION 2

Reinsurance Assumed Accident and Health Insurance Listed by Reinsured Company as of December 31, Current Year

1	2	3	4	5	6	7	8	9	10	11	12
NAIC Company Code	Federal ID Number	Effective Date	Name of Reinsured	Location	Type of Reinsurance Assumed	Premiums	Unearned Premiums	Reserve Liability Other Than for Unearned Premiums	Reinsurance Payable on Paid and Unpaid Losses	Modified Coinsurance Reserve	Funds Withheld Under Coinsurance

NONE

SCHEDULE S - PART 2

Reinsurance Recoverable on Paid and Unpaid Losses Listed by Reinsuring Company as of December 31, Current Year

1 NAIC Company Code	2 Federal ID Number	3 Effective Date	4 Name of Company	5 Location	6 Paid Losses	7 Unpaid Losses
Accident and Health - Non-Affiliates						
79413.....	36-2739571.....	.....01/01/2002	United HealthCare Insurance Company.....	Hartford, CT.....	.....39,172	.....88,814
0599999.	Total - Non-Affiliates.....				.....39,172	.....88,814
0699999.	Total - Accident and Health.....				.....39,172	.....88,814
0799999.	Totals - Life, Annuity and Accident and Health.....				.....39,172	.....88,814

SCHEDULE S - PART 3 - SECTION 2

Reinsurance Ceded Accident and Health Insurance Listed by Reinsuring Company as of December 31, Current Year

1 NAIC Company Code	2 Federal ID Number	3 Effective Date	4 Name of Company	5 Location	6 Type	7 Premiums	8 Unearned Premiums (estimated)	9 Reserve Credit Taken Other Than for Unearned Premiums	Outstanding Surplus Relief		12 Modified Coinsurance Reserve	13 Funds Withheld Under Coinsurance
									10 Current Year	11 Prior Year		
Non-Affiliates												
79413.....	36-2739571.....	.....01/01/2002	United HealthCare Insurance Company.....	Hartford, CT.....	.....SSL/L.....	.....629,169	.....	.....	.....	.....	.....	.....
0299999.	Total - Non-Affiliates.....					.....629,169	.....0	.....0	.....0	.....0	.....0	.....0
0399999.	Totals.....					.....629,169	.....0	.....0	.....0	.....0	.....0	.....0

SCHEDULE S - PART 4

Reinsurance Ceded To Unauthorized Companies

1	2	3	4	5	6	7	8	9	10	11	12	13	14
NAIC Company Code	Federal ID Number	Effective Date	Name of Reinsurer	Reserve Credit Taken	Paid and Unpaid Losses Recoverable (Debit)	Other Debits	Total (Cols. 5 + 6 + 7)	Letters of Credit	Trust Agreements	Funds Deposited by and Withheld from Reinsurers	Other	Miscellaneous Balances (Credit)	Sum of Cols. 9 + 10 + 11 + 12 + 13 But Not in Excess of Col. 8

NONE

SCHEDULE S - PART 5

Five-Year Exhibit of Reinsurance Ceded Business
(000 Omitted)

	1 2002	2 2001	3 2000	4 1999	5 1998
A. OPERATIONS ITEMS					
1. Premiums.....	629	683	607		
2. Title XVIII - Medicare.....					
3. Title XIX - Medicaid.....			14		
4. Commissions and reinsurance expense allowance.....					
5. Total medical and hospital expenses.....					
B. BALANCE SHEET ITEMS					
6. Premiums receivable.....					
7. Claims payable.....					
8. Reinsurance recoverable on paid losses.....	39	760	732		
9. Experience rating refunds due or unpaid.....	236				
10. Commissions and reinsurance expense allowances unpaid.....					
11. Unauthorized reinsurance offset.....					
C. UNAUTHORIZED REINSURANCE (DEPOSITS BY AND FUNDS WITHHELD FROM)					
12. Funds deposited by and withheld from (F).....					
13. Letters of credit (L).....					
14. Trust agreements (T).....					
15. Other (O).....					

SCHEDULE S - PART 6

Restatement of Balance Sheet to Identify Net Credit for Ceded Reinsurance

	1 As Reported (Net of Ceded)	2 Restatement Adjustments	3 Restated (Gross of Ceded)
ASSETS (Page 2, Col. 3)			
1. Cash and invested assets (Line 9).....	23,738,657		23,738,657
2. Amounts recoverable from reinsurers (Line 12).....	39,172	(39,172)	0
3. Accident and health premiums due and unpaid (Line 10).....	251,661		251,661
4. Net credit for ceded reinsurance.....	XXX	39,172	39,172
5. All other admitted assets (balance).....	781,557		781,557
6. Totals assets (Line 23).....	24,811,047	0	24,811,047
LIABILITIES, CAPITAL AND SURPLUS (Page 3)			
7. Claims unpaid (Line 1).....	8,155,486		8,155,486
8. Accrued medical incentive pool and bonus payments (Line 2).....	2,998,560		2,998,560
9. Premiums received in advance (Line 6).....	1,134,369		1,134,369
10. Reinsurance in unauthorized companies (Line 14).....			0
11. All other liabilities (balance).....	1,938,400		1,938,400
12. Total liabilities (Line 18).....	14,226,815	0	14,226,815
13. Total capital and surplus (Line 26).....	10,584,232	XXX	10,584,232
14. Total liabilities, capital and surplus (Line 27).....	24,811,047	0	24,811,047
NET CREDIT FOR CEDED REINSURANCE			
15. Claims unpaid.....	0		
16. Accrued medical incentive pool.....	0		
17. Premiums received in advance.....	0		
18. Reinsurance recoverable on paid losses.....	39,172		
19. Other ceded reinsurance recoverables.....	0		
20. Total ceded reinsurance recoverables.....	39,172		
21. Premiums receivable.....	0		
22. Unauthorized reinsurance.....	0		
23. Other ceded reinsurance payables/offsets.....	0		
24. Total ceded reinsurance payables/offsets.....	0		
25. Total net credit for ceded reinsurance.....	39,172		

SCHEDULE Y (Continued)

PART 2 - SUMMARY OF INSURER'S TRANSACTIONS WITH ANY AFFILIATES

1	2	3	4	5	6	7	8	9	10	11	12	13
NAIC Company Code	Federal ID Number	Names of Insurers and Parent, Subsidiaries or Affiliates	Shareholder Dividends	Capital Contributions	Purchases, Sales or Exchanges of Loans, Securities, Real Estate, Mortgage Loans or Other Investments	Income/ (Disbursements) Incurred in Connection with Guarantees or Undertakings for the Benefit of any Affiliate(s)	Management Agreements and Service Contracts	Income/ (Disbursements) Incurred under Reinsurance Agreements	*	Any Other Material Activity Not in the Ordinary Course of the Insurer's Business	Totals	Reinsurance Recoverable/ (Payable) on Losses and/or Reserve Credit Taken/ (Liability)
Affiliated Transactions												
.....	38-2027689.....	W.A. Foote Memorial Hospital.....	.....	.....(2,303,193)	.....	.....1,784,420	.....	.....	.....	.....	.....(518,773)	.....
.....	38-2594857.....	Physicians Choice Network.....	.....	.....	.....	.....(61,392)	.....	.....	.....	.....	.....(61,392)	.....
.....	38-3311905.....	Physicians Health Plan of South Michigan.....	.....	.....2,303,193	.....	.....(1,981,955)	.....	.....	.....	.....	.....321,238	.....
.....	38-3361367.....	Physicians Health Plan Shared Services Organization.....	.....	.....	.....	.....258,927	.....	.....	.....	.....	.....258,927	.....
9999999	Control Totals.....	.....	.....0	.....0	.....0	.....0	.....0	.....0	XXX	.....0	.....0	.....0

002 of the **Physicians Health Plan of South Michigan**
SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

The following supplemental reports are required to be filed as part of your statement filing. However, in the event that your company does not transact the type of business for which the special report must be filed, your response of NO to the specific interrogatory will be accepted in lieu of filing a "NONE" report and a bar code will be printed below. If the supplement is required of your company but is not being filed for whatever reason, enter SEE EXPLANATION and provide an explanation following the interrogatory questions.

MARCH FILING

1. Will the Medicare Supplement Insurance Experience Exhibit be filed with the state of domicile and the NAIC by March 1?
2. Will the Supplemental Compensation Exhibit be filed with the state of domicile by March 1?
3. Will an actuarial certification be filed with this statement by March 1?
4. Will the Risk-Based Capital Report be filed with the NAIC by March 1?
5. Will the Risk-Based Capital Report be filed with the state of domicile, if required, by March 1?
6. Will the SVO Compliance Certification be filed by March 1?

APRIL FILING

7. Will Management's Discussion and Analysis be filed by April 1?
8. Will the Long-term Care Experience Reporting Forms be filed with the state of domicile by April 1?
9. Will the Investment Risk Interrogatories be filed by April 1?

JUNE FILING

10. Will an audited financial report be filed by June 1?

RESPONSES

NO
YES
YES
YES
YES
YES
YES
YES
NO
YES
YES

EXPLANATIONS:

BAR CODE:

Physicians Health Plan of South Michigan
Overflow Page for Write-Ins

Overflow Page for Write-Ins



MEDICARE SUPPLEMENT INSURANCE EXPERIENCE EXHIBIT

FOR THE STATE OF.....Michigar

NAIC Group Code.....0
Address (City, State and Zip Code).....
Person Completing This Exhibit.....
Title.....

NAIC Company Code.....52564

Telephone Number.....

1	2	3	4	5	6	7	8	9	10	Policies Issued Through 1999				Policies Issued in 2000, 2001 & 2002			
										11	Incurred Claims		14	15	Incurred Claims		18
											12	13			16	17	
Compliance with OBRA	Policy Form Number	Standardized Medicare Supplement Benefit Plan	Medicare Select	Plan Characteristics	Date Approved	Date Approval Withdrawn	Date Last Amended	Date Closed	Policy Marketing Trade Name	Premiums Earned	Amount	Percent of Premiums Earned	Number of Covered Lives	Premiums Earned	Amount	Percent of Premiums Earned	Number of Covered Lives

GENERAL INTERROGATORIES

1. If response in Column 1 is no, give full and complete details.....
2. Claims address and contact person provided to the Secretary of Health and Human Services as required by 42 U.S.C. 1395ss(c)(3)(E) for this state.

2.1 Address.....

2.2 Contact person and phone number.....
3. Billing address and contact person for user fees established under 41 U.S.C. 1395u(h)(3)(B).

3.1 Address.....

3.2 Contact person and phone number.....
4. Explain any policies identified as policy type "O".

MED360

NONE